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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

[X] Declaration ☐ Declaration OR Submitted Submitted after with Initial initial Filing

Filing

Attorney Docket Number	T-3798
First Named Inventor	Abel L. Äguirre
COMPLETE	IF KNOWN
Application Number	
Filing Date	
Group Art Unit	
Evaminer Name	

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Γ	As a below named inventor, f	hereby declare that:									
	My residence, post office address, and citizenship are as stated below next to my name.										
	I believe I am the original, first and sole inventor (f only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a potent is sought on the invention entitled:										
	WAVE ENERGY TRANSDUCER										
1	(Title of the Invention)										
	the specification of which										
Q	□ sattached hereto □ OB										
Ų	was filed on (MM/DD/YYYY) as United States Application Number of PCT International										
200	Application Number and was amended on (MM/DD/YYYY) (it applicable).										
	It hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
L		•		e defined in This	37 Code of Federal Regulations,						
100	§ 1.56.	e inomation which is ma	genar to patentability e	a delined in Title	or code or reducta rioganatione,						
The horaby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or § 365(b) of any foreign application(s) for spatient or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of Amories, listed below and have also identified below, by checking the box, any foreign application for potent or jinventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.											
Pr	lor Foreign Application Number(s)	Country	Foreign Filing Da		Certified Copy Attached? YES NO						
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┢	Additional foreign application r	www.hara ara liatad an a ar	undersoutel erlority de	to alreat PTO/SE	NOSE estectied francis:						
۴	I hereby claim the benefit under										
H	Application Number(s)		MM/DD/YYYY)		lional provisional application						
Γ				numbers are listed on a							
ı				supplemental priority data sheet PTO/SB/02B attached hereto.							
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[Page 1 of 2]

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DECLARATION -Utility or Design Patent Application

I hereby claim the beneit under Title 35, United States Code §120 of any United States application(s), or \$365(c) of any PCT international application designating the United States of America, lated below and, Insodar as the subject maiter of each of the claims of this application is not decisioned in the price United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code \$112, I acknowledge the duty to disclose information which is marterial to patentially as defined in 185 37, Code of Federial Regulations \$1.38 which becames evaluable between the filling date of the prior application and the national or PCT international filling date of this application.

U.S. Parent Application Number		PCT Parent Number			Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)						
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Additional U.S. or PC f international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.														
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number Place Customer Number on the place Customer on the														
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year N	ame		Numl		Namo				9 Numb					
Charles H. C C			25,71			August Programme								
Additional registe	ered practitioner(s	named or	supplemental l	tegistered	Practi	tioner i	nfor	mation she	et PTO	SB/020	attached he	relo.		
Direct all correspo	ndence to:		er Number Xode Lebel					OR	X C	опевро	ondence ad	dress	below	
Narme	Name Charles H. Thomas													
Address	CISLO & TI	ISLO & THOMAS												
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City	Long Beacl	1		St	ate CA		ZIP 90807-2022			2				
	U.S.A.		Telephone 562		-595-8422				Fax 562-595-			19		
I hereby doctore that all statements made herein of my own knowledge not true and that all statements made in Infernation and belief are believed to be true; and further that these statements when the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of This 18 of the United States Code and that such willful false statements may looperable the validity of the application or any parion issued thereon.														
Name of Sole or First Inventor:														
Given Name (first and middle [if any]) Family Name or Sumame														
Abel L.				Aguirre				e						
inventor's Signature	Che.	0.00	grey/	7							Date	4	12/01	
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☐Additional inve	Additional inventors are being named on thesupplemental Additional inventor(s) sheet(s) PTO/SB/02A attached hereto								hereto					